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Fill in this information to identify your case:	
United States Bankruptcy Court for the: EAStern District of MISS DW I	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

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CLERCUUS BARHREPTOY CUEFT -EASTERN DISTRICT ST LOUIS MISSING! - C

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	,	
	Write the name that is on your government-issued picture identification (for example, your driver's license or	Lindy First name Denise	First name
	passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	First name	First name
	years		
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
	Only the last 4 digits of		and the second second second of the second secon
J.	your Social Security	xx - xx - 9780	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Debtor 1

Indu	Denise	wells
First Name	Middle Name	Last Name

Case number	(if known)			

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	I have not used any business names or EINs. River Rise LLC Business name	☐ I have not used any business names or EINs.
Include trade names and	business name	Business name
doing business as names	Business name	Business name
	82-4043657 EIN	EIN
	EIN	EIN
Where you live	te 1946 men ez men en en en eta en mon presentar montatuen broken kalenta, antere en demontato en kantatuta at	If Debtor 2 lives at a different address:
	2731 Allen Ave Number Street	Number Street
	Apt. B	
	City State ZIP Code	City State ZIP Cod
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Cod
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	l have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

^	•••	
Cindy	Denise	Wells
Firet Name	Middle Name	Last Name

Case number	(if known)		

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ч		J	и	u.	4	

Tell the Court About Your Bankruptcy Case

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7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file under	Cha	oter 7				
		☐ Cha	oter 11				
		Cha	oter 12				
		☐ Chap	oter 13				
8.	How you will pay the fee	local your subr with	will pay the entire fee when I file my petition. Please check with the clerk's office in your ocal court for more details about how you may pay. Typically, if you are paying the fee ourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. Ineed to pay the fee in installments. If you choose this option, sign and attach the application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				
		☐ I req By la less pay t	uest th w, a ju than 15 the fee	nat my fee be waived dge may, but is not rec 50% of the official pove	(You may quired to, verty line that choose th	request this opt waive your fee, a at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ar family size and you are unable to nust fill out the Application to Have the
9.	Have you filed for bankruptcy within the last 8 years?	□ No ŪYes.	District District	Eastern	When When	10/16/20 MM/ DD/YYYY	19-4649 p
			District	-	When		Case number
			,				
10.	Are any bankruptcy cases pending or being	(I) No					
	filed by a spouse who is	Yes.	Debtor				Relationship to you
	not filing this case with you, or by a business partner, or by an affiliate?		District		When	MM/DD/YYYY	Case number, if known
			Debtor				Relationship to you
			District		When	MM / DD / YYYY	Case number, if known
11.	Do you rent your residence?	Thus.	No.	ur landlord obtained an e Go to line 12.	viction judg	ment against you'	
				s. Fill out <i>Initial Statemen</i> t of this bankruptcy petition		Eviction Judgment	t Against You (Form 101A) and file it as

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Debtor 1

Cindy Denise Wells
First Name Middle Name Last Name

Case number (# known)		

First Name Middle Nam	ne Last Name						
Part 3: Report About Any E	Businesses You Own as a Sole Proprietor						
12. Are you a sole proprietor of any full- or part-time	No. Go to Part 4.						
business?	Yes. Name and location of business						
A sole proprietorship is a business you operate as an							
individual, and is not a separate legal entity such as	Name of business, if any						
a corporation, partnership, or LLC.	Number Street						
If you have more than one sole proprietorship, use a separate sheet and attach it							
to this petition.	City State ZIP Code						
	Check the appropriate box to describe your business:						
	☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))						
	☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))						
	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))						
	Commodity Broker (as defined in 11 U.S.C. § 101(6))						
	☐ None of the above						
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filling under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).						
For a definition of small	No. I am not filing under Chapter 11.						
business debtor, see 11 U.S.C. § 101(51D).	No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.						
	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.						
Part 4: Report if You Own o	or Have Any Hazardous Property or Any Property That Needs Immediate Attention						
44. Do you own or hove ony							
14. Do you own or have any property that poses or is	UNo .						
alleged to pose a threat of imminent and	Yes. What is the hazard?						
identifiable hazard to public health or safety? Or do you own any property that needs	If immediate attention is needed, why is it needed?						
immediate attention? For example, do you own							
perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
	Where is the property?						
	Number Street						

ZIP Code

State

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Debtor 1

	•	
Cindy	Denise	M
First Norte	Middle Name	Lact Nam

Case number	(if known)	 	

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor	r 1:
---------------------	------

You must check one:

received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ц	I am not required to receive a briefing about
	credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ļ	I am not	required	to receive	а	briefing	about
	credit c	ounseling	because	of		

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

Cindy	Denise	wells
First Nama	Middle Name	l get Nama

Case number (# known)_____

16. What kind of debts do			rily consumer debts? Consumer deb al primarily for a personal, family, or hous	
	you have?	No. Go to line 16b. Yes. Go to line 17.		
			rily business debts? Business debts avestment or through the operation of the	
		No. Go to line 16c.☐ Yes. Go to line 17.		
		16c. State the type of debts yo	u owe that are not consumer debts or bus	siness debts.
	Are you filing under Chapter 7?	☐ No. I am not filing under C	hapter 7. Go to line 18.	er at travasticis comunicies an envintence contra ana entreprendente sementente, a estimatence i sub
	Do you estimate that after any exempt property is	Yes. I am filing under Chap administrative expense	ter 7. Do you estimate that after any exer es are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?
	excluded and	□ No		
adminis are paid available	administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes		
18.	How many creditors do	1 -49	1,000-5,000	25,001-50,000
	you estimate that you owe?	☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 5,001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$590,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pa	rt 7: Sign Below			
Fo	r you	I have examined this petition, a correct.	nd I declare under penalty of perjury that	the information provided is true and
			napter 7, I am aware that I may proceed, I understand the relief available under ea	
			nd I did not pay or agree to pay someone and read the notice required by 11 U.S.C	
		I request relief in accordance w	ith the chapter of title 11, United States C	Code, specified in this petition.
			ult in fines up to \$250,000, or imprisonme	money or property by fraud in connection ent for up to 20 years, or both.
		Signature of Debtor	★ Signature	e of Debtor 2
		Executed on OI OI	2020	
		MM / DD /	YYYY Executed	MM / DD /YYYY

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Debtor 1

and	М	De	rise	wells	
First Name	Mdd	le Name	Last	Name	

Case number (# known)_	
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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attomey for Debtor		MM / DD /YYYY
Printed name		
-irm name		
Number Street		
City	State	ZIP Code
Contact phone	Email addres	ss
Bar number	State	

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Debtor 1

Cindy	Denise	wells	
First Name	Middle Name	Last Name	_

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action consequences?	n with long-term financial and legal
☐ No ☐ Yes	
Are you aware that bankruptcy fraud is a serious crime a inaccurate or incomplete, you could be fined or imprisoned	
☐ Nør ☐ Yes	
Did you pay or agree to pay someone who is not an attor	rney to help you fill out your bankruptcy forms?
Yes. Name of Person	aration, and Signature (Official Form 119).
By signing here, I acknowledge that I understand the risk have read and understood this notice, and I am aware th attorney may cause me to lose my rights or property if I c	at filing a bankruptcy case without an
Signature of Debtor 1	Signature of Debtor 2
Date OI/OI 3030	Date MM / DD /YYYY
Contact phone	Contact phone
Cell phone	Cell phone
Email address	Email address

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Fill in this i	information to identify your cas	e and this	filing:			
Debtor 1	Cindy Der Midde N	11SE Name	Wells			
Debtor 2						
(Spouse, if filing	and the same of th		Last Name			
United States	s Bankruptcy Court for the: EASHER	District	t of 111820001			
Case number	r					Check if this is an amended filing
Officia	I Form 106A/B					v
	edule A/B: Pro	pert	V			12/15
category w responsibl write your	tegory, separately list and desc where you think it fits best. Be a le for supplying correct informa name and case number (if known	as comple ation. If mo wn). Answ	te and accurate as possible. If ore space is needed, attach a s er every question.	two married people eparate sheet to th	e are filing together, bo is form. On the top of a	th are equally
7	own or have any legal or equital	ble interes	st in any residence, building, la	ınd, or similar prop	erty?	
☑ No. 0	Go to Part 2.					
Yes.	Where is the property?					
			What is the property? Check	all that apply.	Do not deduct secured cla	
1.1.			Single-family home		the amount of any secure Creditors Who Have Clain	
St	reet address, if available, or other des	scription	Duplex or multi-unit building			, ,
			Condominium or cooperativ		Current value of the entire property?	Current value of the portion you own?
			 ■ Manufactured or mobile hor ■ Land 	ne	entire property:	portion you own:
			—		\$	\$
			Investment property		Describe the nature of	of your ownership
Ci	ty State	ZIP Code	☐ Timeshare ☐ Other		interest (such as fee	
					the entireties, or a life	estate), if known.
			Who has an interest in the p	roperty? Check one.		
			Debtor 1 only			
Co	ounty		Debtor 2 only		Поставления	
			Debtor 1 and Debtor 2 only		Check if this is co	mmunity property
			At least one of the debtors a	nd another	(see instructions)	
			Other information you wish property identification num		em, such as local	
If you ow	n or have more than one, list her	re:				
			What is the property? Check a	Il that apply.	Do not deduct secured cla	ims or exemptions. Put
			Single-family home		the amount of any secure	
1.2	reet address, if available, or other des	cription	Duplex or multi-unit building		Creditors Who Have Clair	ns Secured by Property.
0.0	acce address, it available, or outer des	оприон	☐ Condominium or cooperative		Current value of the	
			Manufactured or mobile hom	е	entire property?	portion you own?
_			Land		\$	\$
			Investment property		Describe the nature of	f vour ownorship
Cit	ty State	ZIP Code	Timeshare		interest (such as fee	
			Other Who has an interest in the pr	operty? Check one	the entireties, or a life	
				operty: Oleckone.		
_			Debtor 1 only			
Co	ounty		Debtor 2 only		Database	
			Debtor 1 and Debtor 2 only	d another	Check if this is co (see instructions)	mmunity property
			At least one of the debtors ar	a anotner	(See monuchous)	
			Other information you wish t property identification numb		m, such as local	

What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Current value of the Current value of the Condominium or cooperative entire property? portion you own? ☐ Manufactured or mobile home ☐ Land ■ Investment property Describe the nature of your ownership City State ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by ☐ Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No No ☐ Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.1. the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 3.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions)

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Doc 1

Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put Make: 3.3. the amount of any secured claims on Schedule D: Debtor 1 only Creditors Who Have Claims Secured by Property. Model: Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No. Yes Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.1. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Debtor 1

Do	you own or have any k	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and	furnishings	
		nces, furniture, linens, china, kitchenware	,
	Yes. Describe	Kitchen, living room, and bedroom set	\$ 900.00
7.	Electronics		
	collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	
	No Yes. Describe	2 televisions, desktop computer, printer, phor	s 345.00
8	Collectibles of value		
	Examples: Antiques and stamp, coin,	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	
	No Yes. Describe		\$
9.	Equipment for sports a	nd hobbies	-!
	and kayaks;	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	
	No Yes. Describe		\$
10.	□ No	shotguns, ammunition, and related equipment	
	Yes. Describe	Rutger	\$ 100.00
11.	Clothes	thes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	Everyday Clothes	\$ 100.00
12.	Jewelry Examples: Everyday jew gold, silver	relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	No Yes. Describe	Costume Jewelry	\$10.00
	Non-farm animals		•
	Examples: Dogs, cats, b	irds, horses	Till the state of
	Yes. Describe		\$
14.		I household items you did not already list, including any health aids you did not list	
	No .		1
	Yes. Give specific information		\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

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Part 4:	Describe	Your	Financial	Assets
	20301100	. oui	. IIIdiiQidi	Maac (a

Do you own or have any	legal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash	hara in a sanahari sa		6 1	
	nave in your wallet, in your hor	ne, in a safe deposit box, and on hand when you	file your petition	
No D Yes				
			Cash:	\$
7. Deposits of money Examples: Checking, s and other s	savings, or other financial ассои imilar institutions. If you have п	unts; certificates of deposit; shares in credit unior nultiple accounts with the same institution, list ea	ns, brokerage houses, ch.	
□ Ng				
Yes		Institution name:		
	17.1. Checking account:	sm1 one	· · · · · · · · · · · · · · · · · · ·	\$
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:		The state of the s	\$
	17.9. Other financial account:			\$
	or publicly traded stocks investment accounts with brok	erage firms, money market accounts		
☐ Yes	Institution or issuer name:			
			777777888-78888-1	\$
				\$
			······································	\$
9. Non-publicly traded s an LLC, partnership, a		rated and unincorporated businesses, includ	ing an interest in	
	Name of entity:	10	% of ownership: Com	
Yes. Give specific information about	River Rise 1	<u></u>	0%50%	<u>\$ 0.00</u>
them			0%	\$
			<u>078</u> %	\$

20.	Negotiable instruments	include personal ch	ther negotiable and non-negotiable instruments lecks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them.	
	No Yes. Give specific information about them	Issuer name:		\$
				\$ \$
21.	Retirement or pension Examples: Interests in If		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	□ No	_		
	Yes. List each	Town of account	landih dina manan	
	account separately.		Institution name:	s 5086.64
		401(k) or similar pla	r. Flaelity	\$ 30000.0
		Pension plan:		\$
		IRA:		\$
		Retirement account:		\$
		Keogh:		\$
		Additional account:		\$
		Additional account:		\$
		with landlords, prep	made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$ \$ \$
		• •	rental unit:	\$
		Prepaid rent:		\$
		Telephone:		\$
		Rented furniture:		\$
		Other:		\$
				\$
23.	Annuities (A contract for	r a periodic paymer	nt of money to you, either for life or for a number of years)	
	☐ Yes	Issuer name and de	escription:	
				\$
				\$
				\$

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Debtor 1

Case 20-40031 Doc 1 Debtor 1 First Name Middle Name	Filed 01/03/20 E	ntered 01/03/20 16:12 of 71 Case number (if know		Document
24. Interests in an education IRA, in an acc 26 U.S.C. §§ 530(b)(1), 529A(b), and 529 No Pres	(b)(1).	ram, or under a qualified state to		
				\$
	· · · · · · · · · · · · · · · · · · ·			\$
				\$
25. Trusts, equitable or future interests in exercisable for your benefit	property (other than anything I	isted in line 1), and rights or po	wers	
☑ No ☑ Yes. Give specific				
information about them				\$
26. Patents, copyrights, trademarks, trade Examples: Internet domain names, websi No Yes. Give specific	secrets, and other intellectual tes, proceeds from royalties and	property		
information about them				\$
27. Licenses, franchises, and other general Examples: Building permits, exclusive lices No No ☐ Yes. Give specific information about them		oldings, liquor licenses, professior	al licenses	\$
Money or property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				
₩ No				
Yes. Give specific information about them, including whether		Fe	deral: \$	
you already filed the returns		Sta	ate: \$	
and the tax years		Lo	cal: \$	
29. Family support Examples: Past due or lump sum alimony No	gran the contract of more than the second of the contract to the contract to	maintenance, divorce settlement,	property settlemen	ı
Yes. Give specific information		Alin	nony:	\$
			ntenance:	\$
	e e e e e e e e e e e e e e e e e e e	Sup	port:	\$
		Dive	orce settlement:	\$
		Pro	perty settlement:	\$
30. Other amounts someone owes you Examples: Unpaid wages, disability insura Social Security benefits; unpai	ince payments, disability benefits d loans you made to someone el		d' compensation,	
Yes. Give specific information				
,				\$

	First Name Middle Name	Last Name		
31.	Interests in insurance policies			
	•	nsurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	No			
	☐ Yes. Name the insurance compa	Company name:	Beneficiary:	Surrender or refund value:
	of each policy and list its va		benendary.	Surrender of Teluna Value.
				\$
				\$
				\$
				Ψ
32.		e you from someone who has died		
	property because someone has died	rust, expect proceeds from a life insura i.	nce policy, or are currently entitled to receive	
	No			
	Yes. Give specific information		and we have the second of the	
	The second secon			\$
				. !
33.		her or not you have filed a lawsuit or lisputes, insurance claims, or rights to s		
	<i>,</i>	isputes, insurance claims, or rights to s	ue	
	Mo The state of t			
	Yes. Describe each claim			s
	Ottom and the state of the state of			
34.	Other contingent and unliquidated to set/off claims	i claims of every nature, including co	ounterclaims of the debtor and rights	
	□ No			
	Yes. Describe each claim			on Lag
			on same and a constant of the same and the s	\$
25	Any figrancial assets you did not a	lroady list		
5 0.		neddy nat		
	No Cive en existe information		1945 - 1946 - 19	
	Yes. Give specific information	:		\$
36.		entries from Part 4, including any en		15082 1A
	for Part 4. Write that number here			\$0000.01
	· · · · · · · · · ·			
Pa	rt 5: Describe Any Busin	ess-Related Property You Ov	wn or Have an Interest In. List any r	eal estate in Part 1.
37.		quitable interest in any business-rela	ated property?	
	No. Go to Part 6.			
	Yes. Go to line 38.			
				Current value of the
				portion you own? Do not deduct secured claims
				or exemptions.
38	Accounts receivable or commission	ons vou already earned		
	D No	one you arroady carried		
	Yes. Describe	PROFILE AND BE NOTE. The fact of a majoratory of a debate for all facilities and a section as a majoratory of the section of the section and the section of	A CONTRACT OF THE PROPERTY OF	
	TES. DESCRIBE			\$
30	Office equipment, furnishings, an	d cumpline		J
			nines, rugs, telephones, desks, chairs, electronic devices	
	No	, , p, sopiolo, ion illust		
	Yes. Describe	THE COLUMN TRANSPORT FRANCE OF STATE AND ADMINISTRATION OF STATE ADMINISTRATION OF STATE AND ADMINISTRATION OF STATE ADMINISTR	tion from an extensive and an extensive and account to the extensive and the extensi	-T
				b
	W 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11	The second secon	The second secon	

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Case 20-40 Debtor 1 First Name	031 Doc 1 Filed 01/03/20 Entered 01/03/20 16:12:14 Pg 17 of 71 Case number (if known) Last Name	4 Main Document
40. Machinery, fixtures, e	equipment, supplies you use in business, and tools of your trade	
No		
Yes. Describe		NOTE OF THE PARTY
41. Inventory No		
Yes. Describe		\$
42. Interests in partnersh	ips or joint ventures	
No Describe		
Yes. Describe	Name of entity: % of c	ownership:
	River Rise LLC 50	
		% \$
		% \$
43. Customer lists, mailin	ng lists, or other compilations	
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
☐ No		
Yes. Desc		\$
		<u> </u>
₩ No	property you did not already list	
Yes. Give specific information		<u> </u>
		<u> </u>
		\$
		\$
		e e
		a
	of all of your entries from Part 5, including any entries for pages you have attached number here	
	ny Farm- and Commercial Fishing-Related Property You Own or Have an r have an interest in farmland, list it in Part 1.	Interest in.
	any legal or equitable interest in any farm- or commercial fishing-related property?	
No. Go to Part 7. Yes, Go to line 47.		
		Current value of the portion you own? Do not deduct secured claims or exemptions.
47. Farm animals		
/	poultry, farm-raised fish	
Q Y No □ Yan		
☐ Yes		\$
		The state of the s

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48. Crops—either growing or harvested	
Yes. Give specific information	\$
49. Farm/and fishing equipment, implements, machinery, fixtures, and tools of trade	
☐ Yes	\$
50. Farm and fishing supplies, chemicals, and feed	
ÛV No □ Yes	
51. Any farm- and commercial fishing-related property you did not already list	\$
V No Yes. Give specific	
information	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$_D.OO
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No	
Yes. Give specific information	\$ \$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$ 0.00
Part 8: List the Totals of Each Part of this Form	\$ D. O O
55. Part 1: Total real estate, line 2 56. Part 2: Total vehicles, line 5 \$	\$ 0.00
56. Part 2: Total vehicles, line 5 \$\frac{0.00}{1455.00}\$ \$\frac{1455.00}{5.00}\$	
57. Part 3: Total personal and household items, line 15 \$\frac{1455.00}{58. Part 4: Total financial assets, line 36}\$ \$\frac{5,086.64}{5}\$	
59. Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54	1-11116
62. Total personal property. Add lines 56 through 61	+\$ 6541.64
63. Total of all property on Schedule A/B. Add line 55 + line 62	<u>\$ 6541.64</u>

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Fill	in this informa	tion to identify your case:			
Del	otor 1 Un	dy <u>benise</u>	e well	5	
	First National 2	me Middle Name	Last Name		
(Sp	ouse, if filing) First Na	Eaclern	Last Name	ví.	
Uni	ted States Bankrup	otcy Court for the: D	istrict of MISSDU	* L	
	se number (nown)				Check if this is an amended filing
Of	ficial Forn	n 106C			
Sc	chedul	e C: The Prop	erty You	Claim as Exempt	04/19
Usin spac	g the property you	ou listed on Schedule A/B: Prop	perty (Official Form 106A	gether, both are equally responsible for si NB) as your source, list the property that y dditional Page as necessary. On the top of	you claim as exempt. If more
spec of a retir limit	cific dollar amon ny applicable st ement funds—i s the exemptio	unt as exempt. Alternatively, tatutory limit. Some exemption may be unlimited in dollar am	you may claim the full ons—such as those for nount. However, if you nt and the value of the	mount of the exemption you claim. On fair market value of the property being health aids, rights to receive certain be claim an exemption of 100% of fair ma property is determined to exceed that	g exempted up to the amount penefits, and tax-exempt rket value under a law that
Pa	rt 1: Identi	fy the Property You Claim	n as Exempt		
	You are clai	xemptions are you claiming? iming state and federal nonban iming federal exemptions. 11 U ty you list on Schedule A/B t	okruptcy exemptions. 11 J.S.C. § 522(b)(2)		
		on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief	furniture	00.00°	□ \$	
	description: Line from Schedule A/B:		V	100% of fair market value, up to any applicable statutory limit	
	Brief	electronics	, 345.00	П.	
	description: Line from	<u>election</u>	\$ 3, 12,00	\$ \$ 100% of fair market value, up to any applicable statutory limit	
	Schedule A/B:			any applicable statutory mini	
	Brief description:	Firearms	\$ 100.00	Q \$	
	Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
3.	(Subject to adju		3 years after that for case	es filed on or after the date of adjustment n 1,215 days before you filed this case?	.)

Debtor 1

ר וי	n	ot:	71	
j Z	U	UI	1 _	

Case number (if known)

Part 2:

Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief Gescription: Line from Schedule A/B:	s 508 6.44	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	No. of the last of
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	•
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	EXPOSED EXPLANATION OF THE PROPERTY OF THE PRO
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	

Entered 01/03/20 16:12:14 Main Document Case 20-40031 Doc 1 Filed 01/03/20 Fill in this information to identify your case: Debtor 1 Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the EASTM District of MISSDUT Check if this is an Case number amended filing (If known) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Priority** Nonpriority Total claim amount amount ISSOUTI DEPT OF REVENULast 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? Other. Specify No. ☐ Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ■ Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ■ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were

No Yes

Check if this claim is for a community debt

Is the claim subject to offset?

intoxicated

Other, Specify

Debtor 1

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First Name Middle Nar	ne La	st Name	· ·		

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
	Last 4 digits of account number	\$	_ \$	_ \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	Turner of PDIODITY supergrand claims			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
s the claim subject to offset?	Other. Specify			
⊒ No				
Tyes	and the control of th	ell a like proposition consecutive eng	, _{sur l} grysty, medikassinsadinen m	error or all the control of the control of
Priority Creditor's Name	Last 4 digits of account number	\$. \$	_ \$
Phonty Creditor's Name	When was the debt incurred?			
Sumber Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who incurred the debt? Check one.	Sisputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?	_ 5555,			
☑ No ☑ Yes				
ini ICS erang ya dawaya iyo colo a da a da da da da a da a da a da a	от на при в дости на		\$	
Priority Creditor's Name	Last 4 digits of account number	-		
	When was the debt incurred?			
Number Street	A color distance Clarks of the Charles Distance Color			
	As of the date you file, the claim is: Check all that apply			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify	Acceptant with the second with 1996	green, all additions are unit or or	en en egykörtőjára ére érületek e
ls the claim subject to offset?				
· ·				
□ No □ Yes				

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Debto	First Name Middle Name Last Name	Pg 23 of 71 Case number (if known)
Par	2: List All of Your NONPRIORITY Unsecured C	Claims
	o any creditors have nonpriority unsecured claims againous You have nothing to report in this part. Submit this for Yes	
n ir	oppriority unsecured claim, list the creditor separately for ea	betical order of the creditor who holds each claim. If a creditor has more than one ich claim. For each claim listed, identify what type of claim it is. Do not list claims already relaim, list the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
.1	ACL COSN EXPRESS Nonpriority Creditor's Name	Last 4 digits of account number $\frac{7}{2}$ $\frac{6}{4}$ $\frac{4}{9}$ $\frac{9}{1512019}$ \$ $\frac{782.41}{1512019}$
	1231 Greenway Dr. Suite 67 IVVINA TX 750	20
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who incurred the debt? Check one. Debtor 1 only	Contingent Unliquidated Disputed
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:
	At least one of the debtors and another	Student loansObligations arising out of a separation agreement or divorce
	☐ Check if this claim is for a community debt Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts
	☑ No ☐ Yes	Other. Specify CaSh Coan
.2	AMAZON NONDRIGHTS VALUE AND TENTU AVO. N	Last 4 digits of account number 9036 \$ 141.07 When was the debt incurred? 0310912019
(Seattle WA 9810	As of the date you file, the claim is: Check all that apply.
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans
	At least one of the debtors and another Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other Specify
.3	Yes	
	Nonpriority Creditor's Name PO Box 982238	When was the debt incurred?
•	Number Street TX 7990 City State ZIP Code	As of the date you file, the claim is: Check all that apply.
	Who jncurred the debt? Check one.	Contingent Unliquidated

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- ☐ Check if this claim is for a community debt

Is the claim subject to offset?

D No

☐ Yes

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

☐ Obligations arising out of a separation agreement or divorce

Debts to pension or profit sharing plans, and other similar debts Other. Specify Court Court

Disputed

Schedule E/F: Creditors Who Have Unsecured Claims

☐ Student loans

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
Best Buy Credit Services Nonpriority Creditor's Name PO Box 1809 Number Street PAZ 85062 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 01/11/2018 As of the date you file, the claim is: Check all that apply. Contingent Onliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	<u> 1581.12</u>
Nonpriority Creditor's Name PO BOX 954810 Number Street Str. LOUS MO U3195 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number	\$ 1045.5°
BJC Healthcave Nonpriority Creditor's Name PO BOX 954810 Number Street St. LOUIS MO U3195 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number \(\frac{1}{2018} \) When was the debt incurred? \(\frac{1}{2018} \) As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts Other. Specify Macana Debts	\$2,069.8

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation	on Page	
After listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
Nonpriority Ereditor's Name DD BDX 8569 Number Street RVMMOND VA 23285 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts Other. Specify CVP COURT COURT	<u>\$219.78</u>
Nonpriority Creditor's Name 15 W. Jackson Blud. Suite 100 Number Street Chicago IL Lobot City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number & 7 & 2 When was the debt incurred? 0512912019 As of the date you file, the claim is: Check all that apply. Contingent Indiquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CASY LOOY	\$L ₁ 559.72
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes	Last 4 digits of account number 5 7 3 4 When was the debt incurred? LID27/2017 As of the date you file, the claim is: Check all that apply. Contingent Inliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Least Cara	\$1254.32

Case number (# known) Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Peres Medical Arts Pavilion Last 4 digits of account number ____ s 40,00 Dougherty Ferry Rd When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Ther Specify Medical bill D No Yes Last 4 digits of account number 7 500 Digitech Computer Inc When was the debt incurred? 09/14/2018Bedford Ra, Bldg 400 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify Medical bull Is the claim subject to offset? No No Yes Last 4 digits of account number 7499As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other. Specify MydlCal bull Is the elaim subject to offset? No. Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuat	ion Page	
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Nonpriority Creditor's Name H52-1 ForeSt Park Ave Number Street St. Linus M0 43108 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 273 When was the debt incurred? 05/22/20/9 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	<u>\$ 40.00</u>
Nonpriority Creditor's Name 2158 RUSSELL Blvd. Number Street St. LOUIS MO 13104 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number	ş <u>·1, 216</u> .
Laboratory Corp of America Nonpriority Creditor's Name PO BOX 2240 Number Street Burlington NC 27216 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt is the claim subject to offset? No Yes	Last 4 digits of account number 9446 When was the debt incurred? 03103/30/7 As of the date you file, the claim is: Check all that apply. Contingent Infiquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$58.66

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 54 Linden wood University Last 4 digits of account number Nonpriority Creditor's Name
209 South Kingshighway
Number Street
St. Charles mo 63301 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other. Specify <u>laucatory</u> Loan Is the claim subject to offset? No. Yes Last 4 digits of account number 2584leighbors Credit Linion o South Lindbergh When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other. Specify CYCOUT COVO Is the claim subject to offset? No No ☐ Yes 58 , 492,4 Last 4 digits of account number 4 5 0 6 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify CASh LOCK Is the cjaim subject to offset? UNO. Yes

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wells Pg 29 of 71 Debtor 1 Case number ut known Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 2350 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify__ U No ☐ Yes Our urgent Care Billing When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Dether, Specify Medical Is the claim subject to offset? No. ☐ Yes \$ 50,00 ent Care Billing As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts other. Specify Weld Clerk Is the claim subject to offset? 19 No Yes

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Case 20-40031 Doc 1 Filed 01/03/20 Entered 01/03/20 16:12:14 Main Document Pg 30 of 71 Denise Wells Debtor 1 Case number (# known) Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Last 4 digits of account number 7351 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts
Other. Specify Medical Out Is the claim subject to offset? **□** No ☐ Yes Last 4 digits of account number <u>2</u> 383 \$150.00 North First St When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit sharing plans, and other similar debts Other. Specify UCS N COCO Is the plaim subject to offset? No No ☐ Yes s1500.00 Last 4 digits of account number 7 4 9 4 When was the debt incurred? As of the date you file, the claim is: Check all that apply. ☐ Contingent **Unliquidated** Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify <u>CCU (OA)</u> is the claim subject to offset? No No

☐ Yes

Case 20-40031 Filed 01/03/20 Entered 01/03/20 16:12:14 Main Document Doc 1 Pg 31 of 71 Debtor 1 Case number (# known Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: Total claim After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Last 4 digits of account number D093 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension of Is the claim subject to offset? Other. Specify_ No No ☐ Yes owderly Law Firm, LC Last 4 digits of account number St. Charles RK Rd Suite 282 was the debt incurred? As of the date you file, the claim is: Check all that apply. City State 7IP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Wother Specify Service, fee U No ☐ Yes \$ 200.00 Last 4 digits of account number N PEACHTREE ST NW#1001When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts

Other. Specify__YLTQU__UNL__DT_CYPA Is the claim subject to offset? Other, Specify

✓ No✓ Yes

Debtor 1 First Name Middle Name Last Name	Case number (# known)	- Abs. channel
Part 2: Your NONPRIORITY Unsecured Claims Continuati	on Page	
After listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
Nonpriority Creditor's Name PO BOX 740780 Number Street City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Yes	Last 4 digits of account number 9341 When was the debt incurred? 10/31/2017 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 1000000000000000000000000000000000000	s 47.5
Who incurred the debt? Check one. Debtor 1 and Debtor 2 only At least one of the debt? Check if this claim is for a community debt Is the claim subject to offset? Non Pent A Center Nonpriority Creditor's Name A V. Number Street Mo L3118 ZIP Code ZIP Code	Last 4 digits of account number 9555 When was the debt incurred? 04/29/30/9 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other, Specify	\$ 150.0
Spnnt Nonpriority Creditor's Name PO BOX HIGH Number Street COVO STREAM L 60197 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Onliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Prove Service	\$ /370.4

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r listing any entries on this page, number than beginning with 4.4	, fellowed by 4.5, and so forth	Total cisim
St. Ann Municipal Court Plenpriority Creditor's Plane 10405 St. Charles R Rd Plembor Street St. Ann MO 63074 City State ZIP Gode Who inserred the debat? Chook one. Ull Elebtor 2 only Ill Elebtor 2 only Ill Ar teast one of the debate and another Ill Charles It this chairs is a commercity district Is the citation subject to offee?* Pro Ill Yes	Last 4 digits of account number 9 3 3 7 When was the data incurred? 09/09/2018 As all the date you file, the state its Check all that apply. Contingent Ciniculated Cisputed Type of NONPRIORITY unrectured claim: Student loans Cistigns arising out of a deparation agreement or divorce that you did not report as priority claims Debts to bension or profit existing plans, and other similar debts Check Specify 174 177 177 177 177 177 177 177 177 177	* 100-
St Ann Municipal Court Hopping Greditor's Name 10415 St. Charles Rk Rd Number Street St. Ann Mo 63074 City State ZIP Code Whe insurred the delet? Greek one. Usebier 1 only Check of the deleter only State State State Check of the deleter	Least 4 sights of exact with mountain 99/09/2018 An of the date you file, the cloth to: Check all that epply. Contingent Disputed Type of NONPRIORITY unsecured plate: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to paneign or profeshering plans, and other signifer dabts Other. Specify 100 1100 1100 1100 1100 1100 1100 110	<u>, 100</u>
St. Louis Dermatology Heading Red Suite 210 Fluctor Street Giv State 210	Legit d sights of occount number When was the debt incurred? As all the debt you file, the sis in hat Check all it at exply. Undergrant Undergrant Undergrand Undergrand	*40.0

Pg 34 of 71 Case number of known Debter 1 Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.1, followed by 4.5, and so forth-Total cisim 12/2016 960061 As of the date you file, the civim is: Chock all that coply. Sometiment Linliquidated Who becarred the dolot? Check one ☐ Disputed Le Debtor 1 only El Ceptor 2 only Type of NORPRIORITY unsecurari daim: Dabtor 1 and Oobtor 2 only ☐ Student loans Lil At least one of the debtors and another Discriptions ensuring out of a separation agreement or diverce that you did not report as priority claims Chack if this claim is for a community dislot. Debits to pension exproving plans, and other similar debits which specify furniture une of credit la the global subject to offeet? (II) Di Yas 200.00 raffic Law Center Last 4 digits of account humber When was the debt 'nourted'? As of the date you file, the claim is: Check all that apply. El Contingant **U** Unliquidated Who incurred the debit Check one. D) Dismited Cabter 1 only D Cabler 2 ordy Type of MONPRIORITY unaequied claim: Estator 1 and Debtor 2 only 🗆 Shutant loans Di Ai least one of the debtors and another Obligations arising aut of a separation agreement or divorce that you did not report as priority claims Di Chesh if this cistm is for a community disbt Cooks to pansion or profit-sheding plans and continued the second Service Hee and other similar dabis te the claim subject to offect? ∐ Yas 2,023,97 University of Missouri St. Louis Last 4 digits of account number 5364ne University Blud As of the date you file, the cisim is: Check all that apply. ☐ Contingent Unliquidated Incomed the debt? Clast one. □ Disputed Labitor 1 only Cobtor 2 only Type of NONPRIORITY unsecured distra-[4] Debter 1 and Debter 2 only ☐ Student loans At least one of the debtors and another Obligations arising out or a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Cobts to pension or profit-sharing plans, and other similar dobts Woman Specify & du Coltional le the claim subject to offset? No. ☐ Yes

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Other: Specify Transaction overdraft is the plain; subject to offest? I No D Yas Nashington University Physicians a second market 4764 01/25/2019 Box 505462 As of the date you file, the claim in: Check all that apply. Contingent Unliquidated Who incurred the debt? Check one. D) Discussed Debtor 1 only Type of NOMPRIORITY uncommod delm: Disbtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and enother Colligations arising out of a coparation agreement or divorce that you did not report as priority claims Of Shack if this cists is for a community data Disbts to ponsion or profit-shading plans, and other similar debts.

Other, Specify Medy Car is the ciaim subject to offest? ☐ Yes 53.34 naton University Physicians 4 etales of ecocuma number When was the disk incurred? 01/09/2-018As all the data you Ma, the plain is: Check all that apply. ☐ Contingant **D** Unliquidated yeumasi tira dabi? Chack ora. ☐ Disputed Cabtor 1 cnly Cobtor 2 only Type of NONPRIORITY unsecured district Ulco Strategia of September 2 only □ Student loans At least one of the debters and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community disbt Dabts to consion or profit-sharing plane, and other similar dabts is the claim subject to offset? Wither Specify Modu Coul Ŭ No Yes

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8.1 4.2 6.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	In Street Moon Street Moon Strain Str	Hy Phys 63150 ZIP Code	When was the dete you file, the statutes Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured plain: Student loans Collections arising out of a separation agreement or divorce that you clid not report as priority claims Determined the continuous professional plans, and other similar debte of other.	\$ <u>53.3</u> 4
	Washington University of State of the claim aubject to office? Washington University of State of the delay o	149 Of N 63110	When was the debt incerted? 04/30/9 As at the date you his, the alche is: Check all that epply. Contingent Contingent Continued Type of NONPRIORITY unscoured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obtain to expectly Manual Color and other similar debts Other, Specify Manual Color and other similar debts	* 49.12

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When Specify Funiture une of credit is the claim subject to offset? M No. ☐ Yes 8.4 walden University \$4646.99 1065 Samuel Marce Drive As of the date you fits, the cisim is: Check all that apply. Contingent **Unliquidated** Who insured the debt? Check one. [Disouted Cebior i only Type of MONPRIORITY unasoured claim: Debtor 2 only Debtor 1 and Debtor 2 only Situdent loans At least one of the debtors and enotine Caligations arising out of a separation agreement or divorce that you did not report as priority claims Di Cinsak if this districts for a community debt Disputs to ponsion or profit-sharing plans, and other similar distraction. Specify <u>educational loan</u> is the claim subject to offer? No. ☐ Yes Last 4 digits of account number ______ Monoriority Creditor's rileme When was the debt incurred? Humba Streat As of the data you file, the alsim is: Check all that exply. ☐ Contingent City State ZIP Code Unliquidated Who incurred the dight? Chack one LII Disputed D Cabier 1 only Type of NONPRIORITY unsecured daim: Dobtor 2 only Dabier 1 and Dabter 2 only Student loans At least one of the debters and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check If this claim is for a community debt 🔲 Dabte to pansion or profit-sharing plans, and other similar dabte le the claim subject to offset? Ciber. Specify_ □ No ☐ Yes

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	to. Claims for death or parsonal injury while you were intoxicated	C. 3	
	6d. Other. Add all other priority unescured cizims. Write that amount here.	ೆ. ಫ್ಯ	
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otel claims	51. Student leans		
Irom Pari 2	tg. Obligations arising out of a separation agreement or diverse that you did not report as priority elaims	g. Ç	
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	St. Other. Add all other neopriority unsecured cisims. Write that amount here.	ં ની છે	

42,635.80

tij. Total. Add lines ti through tij.

Part 3:

List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you f	or bankruptcy, for a debt that you already listed in Parts 1 or 2. For or a debt you owe to someone else, list the original creditor in Parts 1 or ore than one creditor for any of the debts that you listed in Parts 1 or 2, list the to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Caci	On which entry in Part 1 or Part 2 did you list the original creditor?
PD Bay 791379	Line 7.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	a559
8t. Louis mo 63179	Last 4 digits of account number 9559
City State ZIP Code	
Cacl	On which entry in Part 1 or Part 2 did you list the original creditor?
PD Box 790379	Line (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
St. WUIS MO 43179 City State ZIP Code	Last 4 digits of account number 7588
Cace	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX 790379	Line 7.9 of (Check one): Depart 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
St. LOUIS MO 63179 City State ZIP Code	Last 4 digits of account number $\frac{9}{2}$ $\frac{3}{4}$ $\frac{4}{5}$
10 Sustem	On which entry in Part 1 or Part 2 did you list the original creditor?
DA Bay 104378	Line (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
St. Paul MN 55164 State ZIP Code	Last 4 digits of account number $\frac{4}{9}33$
American Coradius Interrectiona	$\mathcal{L}\!\!$ n which entry in Part 1 or Part 2 did you list the original creditor?
Nama	Line 2.3 of (Check one): Depart 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
Amherst NY 14228 City State ZIP Code	Last 4 digits of account number 2383
American Recovery Service Inc.	On which entry in Part 1 or Part 2 did you list the original creditor?
555 G. Charles Drive Sufein	Line 4.3 (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
Thousand Daks CA 91360 City, State ZIP Code	Last 4 digits of account number 470_{-}
National Enterprise System	On which entry in Part 1 or Part 2 did you list the original creditor?
Name :	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
	Claims Part 2: Creditors with Nonpriority Unsecured
Twinsburg DIT	Last 4 digits of account number 4 7 56
City State ZIP Code	Proce a right of according trainings T

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Case number (# known)

Part 3: List Others to Be Notified About a Debt That You Already Listed

example, if a collection agency is trying to collect from you 2, then list the collection agency here. Similarly, if you have t	tur leankruptey, for a debt that you already listed in Paris 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or note then one creditor for any of the debts that you listed in Parts 1 or 2, list the a to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
FRU	On which satty in Part f or Part 2 did you list the original creditor?
Ph Box 23870	Line 7.4 of (Check one): D. Pari 1: Creditors with Priority Unsecured Claims
Number Street	Fart 2: Creditors with Honoriority Uneccured Claims
Jackson El 2001	Last 4 digits of account numbrile 756
Jackson FL 3224	
midland credet management	Number which entry in Part 1 or Part 2 did you that the original creditor?
2 3/05 Horthsida Drive Suite	200 4 of (Check ons): 🗆 Part 1: Graditors with Priority Unascured Claims
Elumber Sirest	Or sor ons): Or said it creations with Pricing Unissoured Oresides
7	Stains .
San Diego CA 92108	Last 4 digits of account number 5734
Only State ZP Code	orporation in Part 1 or Part 2 did you list the original creditor?
170111.0	Orpa/Tubusahtry in Part 1 or Part 2 old you list the original disentor?
PO BOX 13386	Line 4.9 (Oheck one): 🗆 Part 1: Creditors with Priority Unsecured Claims
Number Street	Claims Claims
Roanoke VA 24033	Lest 4 digits of account number 2986
Amenican Recovery Service ina	NANATEOntry in Part 1 or Part 2 did you list the original creditor?
555 St. Charles Drive Sust 10	DLine 4.3 (Check ons): Dent 1: Creditors with Priority Unsecured Claims
Number Street	e Fait E. Georgia With Honpitolity Shocking
Thousand Oaks CA 91360	Claims H177
City State ZIP Code	Last 4 digits of account number 4107
makefuld 3 Associates Inc	On which entry in Part 1 or Part 2 did you list the original creditor?
DOBTIX 58	Line 1.9 of (Check one): Dent 1: Oreditors with Priority Unsecured Claims
Number Street	■ Part 2: Creditors with Honoricity Unaccured
830 E Plate Are Unit A	Claims
City State ZIP Code	Last 4 digits of account number $\frac{7}{2}$
Credit Control LIC	On which entry in Part 1 or Part 2 did you list the original creditor?
5757 Phantom Drive	Lino 5 · Lat (Chock ono): U Fart 1: Creditors with Priority Uncooured Citizens
Nurgber Street	Fart 2: Creditors with Horpdortty Unasoured
Sute 330	Ciaims
HAZELWOOD MO U3043	2 Last 4 digits of account number 5 $\frac{2}{2}$ $\frac{4}{2}$
Call	On which entry in Pari 1 or Pari 2 did you list the original creditor?
Name DA Day 700279	
PO BOX 790379	Lina \$1_1 of (Chack one). Dil Part 1: Craditors with Priority Unsecured Claims Bil Part 2: Craditors with Monorbody Unsecured
	Cialms
St. Louis mo 63179	Last 4 oligits of accumit number 4873
City State ZIP Code	OS

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Fill in	this information to id	dentify your c	ase:		
Debtor	Cindy Denis	e Wells			
	First Name	Midd	le Name Lest Name		
Debtor (Spouse	2 If filing) First Name	Mide	le Name Last Name		
United	States Bankruptcy Court	for the: Easte	rn District of Missouri		
Case n					☐ Check if this is a
(If know					amended filing
Offic	ial Form 106				
				I IIirod Loocoe	12/15
				nd Unexpired Leases	
informa addition	ation. If more space is nal pages, write your byou have any execu- No. Check this box a Yes. Fill in all of the i	s needed, cop r name and ca story contract and file this for information be	by the additional page, fill it ourse number (if known). Its or unexpired leases? Its with the court with your other show even if the contracts or lease	ng together, both are equally responsible for sup it, number the entries, and attach it to this page. Schedules. You have nothing else to report on this for es are listed on Schedule A/B: Property (Official Form	rm. n 106A/B). or lease is for (for
ex un	ample, rent, vehicle lexpired leases.	lease, celi ph	one). See the instructions for thi	s form in the instruction booklet for more examples o State what the contract or lease is	A BASSALOTY SSTITUTES WITH
Pe	erson or company wi	th whom you	have the contract or lease	State Aust the counser of sease is	101
2.1 F	ox Grove Manage	ment		Rent	
	ame	attoric		· · · · · · · · · · · · · · · · · · ·	
	758 Russell Blvd			·	
	umber Street It. Louis	MO	63104		
: Ci	ity	State	ZIP Code		
2.2 N	PRTO Mid-West I	нс		furniture	
N	ame				
. =	56 W Data Drive				
1	raper	UT	84020		
1	ity	State	ZIP Code	furniture	
: -	Vest Creek Financ	cial		iumure	
	ame PO Box 5518				
N	umber Street				
,	Glen Allen	VA	23058-5518 ZIP Code	,	
- A	ity	State	ZIP COUG	credit card	
	Capital One				
	ame PO Box 30285				
: N	umber Street		04400 0007		
_	Salt Lake City	UT State	84130-0287 ZIP Code		
1				cash loan	
	Ace Cash Express	s, INC			
	1231 Greenway D	rive Suite 6	00		
N	lumber Street	TX	75038		
	rving	State	ZIP Code		

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Debto	r1 '	Cindy Denise	Wells		Case number (# known)	
		First Name M	Idde Name	Last Name		
		Additional Pa	ge if You H	ave More Contracts or Leases		
					What the contract or lease is for	
	Person	or company wi	tn wnom you	have the contract or lease	What the contract or lease is for	
		a Center			furniture	
	Name 5501	Headquarters	n Drive			
	Number	Street	DIIVE		-	
	Planc	o	TX	75024	_	
	City		State	ZIP Code		
27_	Cash	Net USA			cash loan	
•	Name 175 V	W. Jackson Bl	vd Suite 1	000		
	Number	Street	· · · · · · · · · · · · · · · · · · ·		-	
	Chica	ago	IL	60604	_	
	City		State	ZIP Code		
	Amaz	zon			overdue book rental	
	Name	F A				
	A10 I Number	Street		• • • • • • • • • • • • • • • • • • • •	-	
		Seattle	WA	98109		
	City		State	ZIP Code	-	
2					·	
	Name				-	
,	NI. make a a	Cheent		 	-	
	Number	Street				
į	City		State	ZIP Code	-	
2					<u>-</u>	
	Name					
Ī	Number	Street				
					-	
(City		State	ZIP Code		
2				,	•	
	Name	· · · · · · · · · · · · · · · · · · ·	,		-	
					_	
Ī	Number	Street			•	
7	City		State	ZIP Code	-	
	,					
2						
Ĩ	Vame				•	
ī	Number	Street			· -	
Č	City		State	ZIP Code	•	
2 1					•	
2	James		····	· · · · · · · · · · · · · · · · · · ·	-	
r	Vame					
Ĭ	lumber	Street		***	<u>-</u>	
7	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	-	

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Fill in this information to identify your case:	•
Debtor 1 Cindy Denise Wells	
First Name Middle Name Last Name Debtor 2	
(Spouse, If filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Eastern District of Missouri	
Case number(f known)	☐ Check if this is an
(II NIOMI)	amended filing
Official Form 106H	
	12/15
Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as	complete and accurate as possible. If two married people
are filing together, both are equally responsible for supplying correct information. If mo and number the entries in the boxes on the left. Attach the Additional Page to this page case number (if known). Answer every question.	ore space is needed, copy the Additional Pages, write your name and
1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a	a codebtor.)
☑ No	
Yes	Community property states and territories include
2. Within the last 8 years, have you lived in a community property state or territory? (Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washir	ngton, and Wisconsin.)
☑ No. Go to line 3.	
Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	
□ No .	
Yes. In which community state or territory did you live? F	ill in the name and current address of that person.
Name of your spouse, former spouse, or legal equivalent	
Number Street	
City State ZIP Code	
3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor l	f your spouse is filing with you. List the person
shown in line 2 again as a codebtor only if that person is a guarantor or cosigner.	Make sure you have listed the creditor on
Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule Schedule E/F, or Schedule G to fill out Column 2.	G (Official Form 1066). Use Scriedule D,
Schedule Elf, of Schedule S to the Gas Solution 2.	a to a a state of the state of the state of
Column 1: Your codebter	Column 2: The creditor to whom you owe the debt
	Check all schedules that apply:
3.1 Lillian Strickland	Schedule D, line
Name	Schedule E/F, line 7.5
Number Street	☐ Schedule G, line
City State ZIP Code	
3.2	
Name	Schedule D, line
Number Chart	Schedule E/F, line
Number Street	Suiculic O, inte
City State ZIP Code	
3.3	Schedule D, line
Name	☐ Schedule E/F, line
Number Street	☐ Schedule G, line
City State ZIP Code	

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Debtor 1 Cindy Denise Wells Case number (# known) ______

	Additional Page to Li	st More Codebtors		
	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
	·			Check all schedules that apply:
3				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	Adminer Orient			
	City	State	ZIP Code	-
3				Schedule D, line
	Name			Schedule E/F, line
	0	, , , , , , , , , , , , , , , , , , ,		Schedule G, line
	Number Street			
	City	State	ZIP Code	-
3	•			Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
	Number Street			
	City	State	ZIP Code	-
	Oily		÷ • •	
3	Name			Schedule D, line
	1400116			Schedule E/F, line
	Number Street			Schedule G, line
				-
	City	State	ZIP Code	
3				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3				_ Schedule D, line
•	Name			Schedule E/F, line
! !	Number Street	<u></u>		Schedule G, line
	(ADIIROG) COCC			
!	City	State	ZIP Code	····
ß				Schedule D, line
<u> </u>	Name			Schedule E/F, line
:				Schedule G, line
:	Number Street			
1	City	State	ZIP Code	<u>-</u>
3.	•			Schedule D, line
	Name			Schedule E/F, line
				Schedule G, line
:	Number Street			— Outcode Of the
)	City	State State	ZIP Code	
٠.	The state of the s	e a mande e a rapie, en la trace, est trace l'est de la mandation de la politique de la resident de la republica de la financia de la resident de la financia del financia de la financia de la financia del financia de la financia del la financia de la financia d	5.	And the state of t

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Fill in this information to identify	your case:			•	
Debtor 1 Cindy Denise We	ls				
First Name	Middle Name	Last Name			
Oebtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	Eastern District of Missouri	İ			
Case number(If known)				Check if th	
					ended filing lement showing postpetition chapter 13
					as of the following date:
Official Form 106I				MM / DI	D/ YYYY
Schedule I: You	r Income				12/15
supplying correct information. If we	ou are married and not fil se is not filing with you, top of any additional pa	ing jointly, and you do not include info	ur spouse is ormation abo	living with your spou	r 2), both are equally responsible for ou, include information about your spouse. ise. If more space is needed, attach a nown). Answer every question.
1. Fill in your employment information.		Debtor 1			Debtor 2 or non-filing spouse
If you have more than one job,					
attach a separate page with information about additional	Employment status	Employed			Employed
employers.		Not employe	ed		☐ Not employed
Include part-time, seasonal, or self-employed work.		Internet and I	Phono Por	vair	<u>:</u>
Occupation may include student or homemaker, if it applies.	Occupation				
;	Employer's name	Charter Com	munication	S	
	Employer's address	13022 Hollen	berg Drive	!	
		Number Street			Number Street
,					
•					:
r r		Bridgeton, M		63044 Code	City State ZIP Code
- - - -	How long employed the	ere? 2 years			
Part 2: Give Details About	Monthly Income				
	the date you file this for	m. If you have nothi	ng to report f	or any line, wr	ite \$0 in the space. Include your non-filing
spouse unless you are separated If you or your non-filing spouse ha	Ive more than one employ	er, combine the info			4
below. If you need more space, a	itacii a separate sheet to t	nis ionii.	Fa	Dobtos 2	For Debtor 2 or
!				Debtor 1	non-filing spouse
List monthly gross wages, sal deductions). If not paid monthly,	ary, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2. \$	2408.84	\$
3. Estimate and list monthly over	time pay.		3. +\$	0.00	+ \$
4. Calculate gross income. Add li	ne 2 + line 3.		4. \$	2408.84	\$

Official Form 106I

Schedule I: Your Income

page 1

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Debtor 1	Cindy Denise Wells First Name Middle Name Last Name		Case number (# Im	омп)	
			For Debtor 1	For Debtor 2 or	
; ;			70, DUDIO, 1	non-filing spouse	:
· Copy	/ line 4 here	4.	\$ 2408.84	\$:
E lieta	all payroll deductions:				
	• •	E o	s 250.80	¢.	:
	Tax, Medicare, and Social Security deductions	5a.	\$ 250.80 \$ 150.80	\$ \$:
Î	Mandatory contributions for retirement plans	5b.			:
	Voluntary contributions for retirement plans	5c.	\$	\$ \$	
	Required repayments of retirement fund loans	5d.	\$ \$ 197.2	\$:
:	Insurance	5e.			:
5f.	Domestic support obligations	5f.	\$	\$	
•	Union dues	5g.	\$	<u>a</u>	:
5h.	Other deductions. Specify: Electronic Purchasing Plan	5h.	+\$ 67.88	+ \$	į
6. Add	I the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.	\$ <u>666.68</u>	\$	
7. Cak	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <u>1742.16</u>	\$:
8. List	all other income regularly received:				;
8a.	Net income from rental property and from operating a business, profession, or farm				· !
:	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	\$:
	Interest and dividends	8b.	\$	\$:
	Family support payments that you, a non-filing spouse, or a depende regularly receive	nt			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	\$:
: : 8d.	Unemployment compensation	8d.	\$	\$:
8e.	Social Security	8e.	\$	\$	
	Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.	\$	\$	- -
- Ra	Pension or retirement income	8g.	\$	\$.	
:		8h.		4.0	
,	Other monthly income. Specify:		,		
9. Add	l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$ 0.00	\$	
	ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10	\$1742.16	+ \$	= \$
: :11	e all other regular contributions to the expenses that you list in Scheo	luie .	7.		<u></u>
Inclu	de contributions from an unmarried partner, members of your household, y			ommates, and other	- -
Оо п	ot include any amounts already included in lines 2-10 or amounts that are	not a	vailable to pay expe	nses listed in Schedule J.	:
Spec	sify:			11	h \$
	the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Your Assets and Liabilities and Certain S				\$ 1742.16 Combined
	you expect an increase or decrease within the year after you file this f	orm'	?		monthly income
	No. Yes. Explain:				
. =	100. Explain.				

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Fill in this information to identify	your case:				
Debtor 1 Cindy Denise Wel	ls	Check if th	is is:		
First Name Debtor 2	Middle Name Last Name			na	
(Spouse, If filing) First Name	Middle Name Last Name	B		_	etition chapter 13
United States Bankruptcy Court for the: Eastern District of Missouri exper			es as of	the following	date:
Case number (if known)		MM / DI	O / YYYY		
Official Form 106J	-				
Schedule J: Yo	ur Expenses				12/15
Be as complete and accurate as poinformation. If more space is need (if known). Answer every question	ossible. If two married people are fili ed, attach another sheet to this form	ng together, both are equally r . On the top of any additional (esponsib pages, w	ele for supplyi rite your name	ng correct and case number
Part 1: Describe Your Hou	ısehold				
L. Is this a joint case?					
No. Go to line 2. Yes, Does Debtor 2 live in a	separate household?				
☐ No ☐ Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.			and the second s
2. Do you have dependents?	No	Dependent's relationship to		Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	- ·	age	with you?
Do not state the dependents'		Daughter	_ 4	3	□ No ☑ Yes
names.	·				☐ No
					☐ Yes ☐ No
					Yes
					☐ No
					☐ Yes
					☐ No ☐ Yes
Do your expenses include expenses of people other than	E No □ Yes				
yourself and your dependents?	— 163			•	
	ing Monthly Expenses		 		
Estimate your expenses as of you	r bankruptcy filing date unless you a	re using this form as a supple	ment in	a Chapter 13 o	ase to report
expenses as or a date after the pa applicable date.	nkruptcy is filed. If this is a supplem	cilai ochennie o, check ale se	A ME DIO	op of all for	, 4114 1111 111 111
Include expenses paid for with no	n-cash government assistance if you d it on <i>Schedule I: Your Income</i> (Offi			Your expe	nses
	expenses for your residence. Include		4.	\$	725.00
If not included in line 4:					
4a. Real estate taxes			4a.		
4b. Property, homeowner's, or	renter's insurance		4b.	\$	
4c. Home maintenance, repair,	and upkeep expenses		4c.	\$	
4d. Homeowner's association of			4d.	\$	

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Debtor 1 Cindy Denise Wells Case number (# known)_______

			Your expenses
		_	\$
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		. 050.00
	6a. Electricity, heat, natural gas	6a.	\$ 250.00
	6b. Water, sewer, garbage collection	6b.	\$ 0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 60.00
	6d. Other. Specify: Furniture and Credit Card Payments	6d.	\$ 300.00
7.	Food and housekeeping supplies	7.	\$ 200.00
8.	Childcare and children's education costs	8.	\$ <u>168.00</u>
9.	Clothing, laundry, and dry cleaning	9.	\$
10.	Personal care products and services	10.	\$ 50.00
11.	Medical and dental expenses	11.	\$ 116.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$ 100.00
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$
	15d. Other insurance. Specify:	15d.	\$
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	1 7b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debtor 1	Cindy Denise Wells	Case number (# Inown)	
	First Name Mickle Name East Name Der. Specify:	21.	+\$
22. Cal	culate your monthly expenses.		
22a	. Add lines 4 through 21.	22a.	\$ 2209.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22c	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$ <u>2209.00</u>
23. Caic	ulate your monthly net income.		
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$ <u>1742.16</u>
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$ 2209.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

✓ Yes. Explain here: Rent increases every year.

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Isli in this information to locally your case:		CTT ACCOUNTS	
Doorer & andy Denise	uells		
First Name Middle Name Disortor 2	Last Name		
(Spouse, if filing) First Name Middle Name	Last Name	- Common to Annual Transport	
United States Sankruptcy Court for the: District of _			
Cese number (If known)			Di Chack if this is a
		a v	amended filing
Official Form 105Dec			
Declaration About an Ir	ndividual E	ebtor's Schedules	12/15
If two married people are filling togsther, both are equ	nolle: roomenatiel s dar ecu	mobiling partage information	
You must file this form whenever you file bookruptcy obtaining money or property by fraud in connection t			
years, or both. 18 U.S.C. \$5 152, 1244, 1519, and 3576		See a common and a common makes and the common decommon d	same a second a second selfer was a second
Sign Bolox			
Old you pay or agree to pay someone who is NOT	an afterney to help you	u MI out kankrupicy forms?	
(V)c		Aller Commence of the Commence	dana tion and
Yes. Mame of percon		 Attach Bankruptcy Fathion Praparer's Motice, Dec Signsture (Official Form 119). 	ISIENOA, ƏNC
Under parally of carjury, I dealers that I have read	I the summery and ech	edules fied with this declaration and	
that they are true and correct.	*		
× for for Sta			
Signature of Coater 1	Signature of Debtor	:2	
01/03/0000			
Date OF CATALOGIC MM/ DD / YYYY	Date	MYY	

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Debtor 2	e Name L	ast Name	_		
Debtor 2 Spouse, if filing) First Name Middle United States Bankruptcy Court for the: Eastern Case number	e Name L		_		
nited States Bankruptcy Court for the: Eastern			1		
se number		ast Name			
				L	Check if this is an amended filing
					•
Gialal Campa 407					
fficial Form 107 tatement of Financial	l Affaira for	Individu	ale Eiling fo	r Bankruntov	04/1
e as complete and accurate as possible. formation. If more space is needed, attainmer (if known). Answer every question	If two married peop uch a separate sheet n.	le are filing toge to this form. O	ether, both are equally the top of any addition	responsible for supplyir	ng correct
Part 1: Give Details About Your M	larital Status and	Where You L	ved Before		
. What is your current marital status?					
☐ Married					
Not married During the last 3 years, have you lived	d anywhere other th	an where you li	re now?		
Mot married	n the last 3 years. Do	not include whe			Dates Debtor 2 lived there
During the last 3 years, have you lived No Yes. List all of the places you lived in	n the last 3 years. Do	not include whe	re you live now.		
During the last 3 years, have you lived No Yes. List all of the places you lived in Debtor 1:	n the last 3 years. Do Dates lived	not include whe	re you live now. otor 2:		lived there
During the last 3 years, have you lived No Yes. List all of the places you lived in	n the last 3 years. Do	not include whe	re you live now. otor 2:		lived there
Not married During the last 3 years, have you lived No Yes. List all of the places you lived in Debtor 1: 2011 California Ave	n the last 3 years. Do Dates lived From	not include whe	re you live now. otor 2: Same as Debtor 1		lived there Same as Debtor:
Not married During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO	n the last 3 years. Do Dates lived From To	not include whe	re you live now. otor 2: Same as Debtor 1 Number Street	State 7IB Code	lived there Same as Debtor 3
During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO	n the last 3 years. Do Dates lived From To	not include when Dethere	re you live now. otor 2: Same as Debtor 1 Number Street	State ZIP Code	Same as Debtor : From To
Not married During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO	n the last 3 years. Do Dates lived From To	not include when Dethere	re you live now. otor 2: Same as Debtor 1 Number Street	State ZIP Code	lived there Same as Debtor 3
Not married During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO	n the last 3 years. Do Dates lived From To 63104 ZIP Code From	not include when Dethere	re you live now. otor 2: Same as Debtor 1 Number Street	State ZIP Code	From Same as Debtor 3
During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO City State 2	n the last 3 years. Do Dates lived From To 63104 ZIP Code	not include when Dethere	re you live now. Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	FromToToTo
During the last 3 years, have you lived in No Yes. List all of the places you lived in Debtor 1: 2011 California Ave Number Street Apt. A Saint Louis MO City State 2	n the last 3 years. Do Dates lived From To 63104 ZIP Code From	not include when Dethere	re you live now. Same as Debtor 1 Number Street City Same as Debtor 1	State ZIP Code	From Same as Debtor 3

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	First Name Middle Name Last N	ame		mber (# known)	
Fill in	ou have any income from employment the total amount of income you received are filing a joint case and you have inco	from all jobs and all busin	nesses, including part-tin	ne activities.	ndar years?
	o es. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions an exclusions)
	From January 1 of current year until he date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$21,672.00	Wages, commissions, bonuses, tips	\$
	•	Operating a business		Operating a business	
F	For last calendar year:	Wages, commissions, bonuses, tips	s 32,117.00	Wages, commissions, bonuses, tips	\$
(January 1 to December 31, 2018	Operating a business		Operating a business	
F	For the calendar year before that:	Wages, commissions,		☐ Wages, commissions,	
(.	January 1 to December 31, 2017	bonuses, tips Operating a business	\$ 27,754.00	bonuses, tips Operating a business	\$
Includ	le income regardless of whether that inco ployment, and other public benefit paym	ome is taxable. Examples ents; pensions; rental inc	ome; interest; dividends;	money collected from laws	suits; royalties; and
Includ unem gamb List e	de income regardless of whether that inco ployment, and other public benefit paym ling and lottery winnings. If you are filing ach source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Includ unem gamb List e	de income regardless of whether that inco ployment, and other public benefit paym ling and lottery winnings. If you are filing ach source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. De	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and
Includ unem gamb List e	de income regardless of whether that inco ployment, and other public benefit paym ling and lottery winnings. If you are filing ach source and the gross income from e	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and e under Debtor 1. Gross income from each source
Include unem gamb	de income regardless of whether that incopioyment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details.	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income	of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and a under Debtor 1. Gross income from each source (before deductions ar
Include unem gamb	de income regardless of whether that inco ployment, and other public benefit paym ling and lottery winnings. If you are filing ach source and the gross income from e	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income	of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and a under Debtor 1. Gross income from each source (before deductions ar
Include unem gamb	te income regardless of whether that incopioyment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details.	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income	of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and a under Debtor 1. Gross income from each source (before deductions a
Include unem gamb List ea No Ye	te income regardless of whether that inceployment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income	of other income are alinome; interest; dividends; e income that you receive not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions a exclusions)
Include unem gamb List ea No Ye	te income regardless of whether that inceployment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alinome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
Include unem gamb List ea No.	te income regardless of whether that incopioyment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alinome; interest; dividends; e income that you receive on not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions at exclusions)
Include unem gamb List er No Ye	te income regardless of whether that inceployment, and other public benefit payming and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alinome; interest; dividends; e income that you receive to not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions ar exclusions)
Include unem gamb List ea List ea Ye	te income regardless of whether that inceployment, and other public benefit paymiling and lottery winnings. If you are filing ach source and the gross income from e oes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	ome is taxable. Examples ents; pensions; rental income is joint case and you have ach source separately. Debtor 1 Sources of income Describe below.	of other income are alinome; interest; dividends; e income that you receive no not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	suits; royalties; and e under Debtor 1. Gross income from each source (before deductions ar

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Debtor 1	Cindy Denise Wells	····	·	Case n	number (# inown)	
	First Name Middle Name	Last Name				
Part 3:	List Certain Payments	fou Made Befor	e You Filed	for Bankruptcy		
						<u>V · · · · · · · · · · · · · · · · · · </u>
6. Are eit	her Debtor 1's or Debtor 2's	debts primarily co	onsumer debt	ts?		
☐ No.	Neither Debtor 1 nor Debt	or 2 has primarily	consumer de	bts. Consumer debts an	e defined in 11 U.S.C. § 101	.(8) as
	During the 90 days before y				\$6,825* or more?	
	No. Go to line 7.					
	Yes. List below each cre	editor to whom you	naid a total of	\$6.825* or more in one	or more payments and the	
	total amount you p	aid that creditor. Do	not include p	ayments for domestic su nents to an attorney for t	pport obligations, such as	
	* Subject to adjustment on 4	1/01/22 and every 3	3 years after th	at for cases filed on or a	fter the date of adjustment.	
🗹 Ye	s. Debtor 1 or Debtor 2 or bo	th have primarily	consumer de	bts.		
	During the 90 days before y	ou filed for bankrup	otcy, did you p	ay any creditor a total of	\$600 or more?	
	No. Go to line 7.					
	Yes. List below each creditor. Do not include allmony. Also, do n	lude payments for	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		<u></u>		\$	_ \$	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City State	ZIP Code				Other
	Creditor's Name			\$	<u> </u>	☐ Mortgage
	Creditors Name					Car
	Number Street					Credit card
						Loan repayment
						☐ Suppliers or vendors ☐ Other
	City State	zIP Code				□ Otner
				\$	_ \$	☐ Mortgage
	Creditor's Name					Car
	Number Street					☐ Credit card
	10011100					Loan repayment
						Suppliers or vendors
	City State	ziP Code				☐ Other
	,					

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1	Cindy Denise Wells		•	Case number (# known)_	
	First Name Middle Name Last Name				
nsid orpo gen	in 1 year before you filed for bankruptcy, did yeers include your relatives; any general partners; repraises of which you are an officer, director, person, including one for a business you operate as a sea schild support and alimony.	elatives of any (on in control, o	general partners; p r owner of 20% or i	artnerships of whicl more of their voting	n you are a general partner; securities; and any managing
1 N	lo .				
1 Y	es. List all payments to an insider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			\$	\$	
	insider's Name				
	Number Street				
					- -
	City State ZIP Code				
			•		
	Insider's Name		\$	_ \$	
	110001 5 112.115				;
	Number Street				
			•		:
	City State ZIP Code				
inclu I	nsider? de payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
	Insider's Name		\$	_ \$	*
	Number Street				
	City State ZIP Code				
			\$		
	Insider's Name				
	•				
	Number Street				
	City State ZIP Code	•			•

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Debtor 1	Cindy Denise Wells			Case number (# 16	10Wn)	
	First Name Middle Name L	ast Name				
Part 4:	Identify Legal Actions, Repo	ssessions, and	Foreclosure s			
	n 1 year before you filed for bankru					
	Il such matters, including personal injection disputes.	ury cases, small cla	lims actions, divo	rces, collection suits, pa	ternity actions, support	or custody modification
_	•					
U N ØZ ∨	o es. Fill in the details.					
	es, i m m are details.	Nature of the c	aga	Court or agency		Status of the case
,	Case title Bank of America vs	I was sued I America for	an Bank of	St. Louis City C	Court	- Pending
		unpaid debt	•		= 3	On appeal
-	Cindy Denise Wells	 .		1520 Market St Number Street	reet	Concluded
	Case number	•		St. Louis	MO 63103	
•	Lase number				State ZIP Code	-
	Case title	•				- Pending
•	case rue			Court Name		On appeal
-		 :		Number Street		Concluded
	_	1				
(Case number	- :		City	State ZIP Code	-
				•		
	o. Go to line 11. es. Fill in the information below.					
		Desc	ribe the property		Date	Value of the property
	DNO Devil	2010	3 Storm Blue (Chevrolet Cruze LS		LINICALOMANI
	PNC Bank Creditor's Name				05/2018	\$ UNKNOWN
	249 5th Ave., Ste. 30	•				
	Number Street	Expl	ain what happened			
		Ø	Property was rep	ossessed.		
	<u></u>		Property was fore			
	Pittsburgh PA	15222	Property was gar	nished.		
			Property was atta	iched, seized, or levied.		
		Desc	ribe the property		Date	Value of the property
				-		
		•				\$
	Creditor's Name	· · ·				
		:			•	
	Number Street	Expla	in what happened			
			• •			
			Property was rep			
			Property was fore			
	City State ZIF	Code	Property was gar			

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	Cindy Denise Wells	Case nur	nber (# known)	
	First Name Middle Name Last I	<u>kame</u>		
		otcy, did any creditor, including a bank or finance	ial institution, set off any amo	ounts from you
CO N	unts or refuse to make a payment bec	ause you owed a debt?		
	es. Fill in the details.			
•	es. I in it the details.			
		Describe the action the creditor took	Date action was taken	Amount
Cr	reditor's Name			
			\$;
Ni	umber Street	•	***************************************	
_			:	
Ci	ty State ZIP Code	Last 4 digits of account number: XXXX	ny garagaga manana	
		cy, was any of your property in the possession	of an assignee for the benefit	of
	tors, a court-appointed receiver, a cus	stodian, or another official?		
N				
Y	es			
5:	List Certain Gifts and Contribu	tions		
hiı	n 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of n	nore than \$600 per person?	
N				
	es. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
•				
				\$
Pe	erson to Whom You Gave the Gift			Ψ
_				\$
Nu	imber Street			
_				
Cit	ty State ZIP Code			
Pe	erson's relationship to you	:		
		•		
	ifts with a total value of more than \$600 er person	Describe the gifts	Dates you gave the gifts	Value
•	•		· -	
			***************************************	\$
re	rson to Whom You Gave the Gift			
_				\$
Nu	imber Street			
Cit	y State ZIP Code			
D.	erson's relationship to you			
	ייסטיי ב וייסטיים ווויסטיים בייסטיים בייסטיים בייסטיים			

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or 1	Cindy Denise Wells	Case number (# known)		
	First Name Middle Name Las	t Name		
		ptcy, did you give any gifts or contributions with a total value	e or more man sou	o to any charity?
U 1	es. Fill in the details for each gift or con	tribution.		
	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600		contributed	
7	Charity's Name	-		\$
•	manty's tvane			
-		-		\$
ī	lumber Street	• •		
			•	
7	City State ZIP Code	-		
`	ay Saic 21 Soci			
	_			
t 6:	List Certain Losses			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
				\$
_	· -			
t 7:	List Certain Payments or Tran	nsfers		
Nith	in 1 year before you filed for bankrup	tcy, did you or anyone else acting on your behalf pay or trai	sfer any property	to anyone
you	consulted about seeking bankruptcy	or preparing a bankruptcy petition?		
		eparers, or credit counseling agencies for services required in yo	our pankrupicy.	
Z 1				
」	es. Fill in the details.			
		Description and value of any property transferred	Date payment or transfer was	Amount of paymer
	Person Who Was Paid		made	
	New horas Charact			œ
	Number Street	•		Φ
				\$
				Ψ
	City State ZIP Code	:		
	Email or website address			
	Person Who Made the Payment, if Not You			

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	Cindy Denise Wells First Name Middle Name	Last Na	ıme	_	Case number (# known)	
ře -	A CONTRACT OF MANAGEMENT AND ANALYSIS OF A CONTRACT OF A C	a programme and a second				a comparable and a soft per a second	
			Description and value	of any property	transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid	1					œ
	Number Street	-					Ψ
						4	\$
	City State ZIP	Code					
		· · · · · · · · · · · · · · · · · · ·					
	Email or website address	•					
	Person Who Made the Payment, if Not You	NJ .					
	in 1 year before you filed for b					ansfer any property to	o anyone who
	nised to help you deal with you ot include any payment or transf			ents to your cre	ditors?		
9 1							
	es. Fill in the details.						
			Description and value	of any property	transferred	Date payment or transfer was made	Amount of pay
	Person Who Was Pald						
	Number Street						\$
							\$
		Code	cv. did vou sell. trad	e. or otherwise	transfer any propert	v to anvone, other tha	n property
Withing rans notice to the control of the control o	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that	bankrupto of your bu ansfers ma	usiness or financial ade as security (such	affairs? as the granting			
Withing rans notice to the control of the control o	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that lo	bankrupto of your bu ansfers ma	usiness or financial ade as security (such	affairs? as the granting statement.	of a security interest o	r mortgage on your pro	perty).
Vithi rans nclud Do no DIN N	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that lo	bankrupto of your bu ansfers ma	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans nelucion nelucion nelucion nella N	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that to 'es. Fill in the details.	bankrupto of your bu ansfers ma	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans nelucion nelucion nelucion nella N	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that to 'es. Fill in the details.	bankrupto of your bu ansfers ma	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans ncluded to the control of the control o	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that to res. Fill in the details. Person Who Received Transfer Number Street	bankrupto of your bu ansfers ma	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans nelucion nelucion nelucion nelucion nelucion nel nel nel nel nel nel nel nel nel ne	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that to res. Fill in the details. Person Who Received Transfer Number Street	bankrupto of your bu ansfers ma t you have	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans of the control of the co	in 2 years before you filed for I sferred in the ordinary course of the both outright transfers and transfers that to include gifts and transfers that to 'es. Fill in the details. Person Who Received Transfer Number Street City State ZIP	bankrupto of your bu ansfers ma t you have	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans nelucion nelucion nelucion nelucion nelucion nelucion nelucion nel marchine nel marc	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that Io 'es. Fill in the details. Person Who Received Transfer Number Street City State ZIP Person's relationship to you	bankrupto of your bu ansfers ma t you have	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
Within rans nelucion nelucion nelucion nelucion nelucion nelucion nelucion nel marchine nel marc	in 2 years before you filed for I sferred in the ordinary course of de both outright transfers and tra ot include gifts and transfers that IO 'es. Fill in the details. Person Who Received Transfer Number Street City State ZIP Person's relationship to you Person Who Received Transfer	bankrupto of your bu ansfers ma t you have	usiness or financial ade as security (such a aiready listed on this Description and value	affairs? as the granting statement.	of a security interest o Describe any prope	r mortgage on your pro	perty). Date trans
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re a benef No			ptcy, did you transfer any proper set-protection devices.)	ty to a self-settled true	st or similar device of w	thich you
	in the details.		,			
☐ Yes. Fill	in the details.					
			Description and value of the prope			Data Assaultus
			Description and value of the prope	rty transferred		Date transfer was made
			A .			•
Name of t	trust		<u>.</u>			
						;
			•			
para para para para	The state of the state of the state of the state of		ente este vola devisat de versitario en este el mensione en el compositorio en el composi	and the second	manage and an extra section of the s	are each more con-
8: List	Certain Financia	al Accounts	, Instruments, Safe Deposit	Boxes, and Storag	e Units	
/ithin 1 ye/	ar before you filed	for bankrupt	cy, were any financial accounts o	or instruments held in	your name, or for your	benefit.
	d, moved, or transi		sy, maio any manona accounts t		your manner or tor your	50110114
-			or other financial accounts; cert	ificates of deposit; sha	ares in banks, credit un	ions,
-	louses, pension fu	ınds, coopera	tives, associations, and other fir	nancial institutions.		
No						
Yes. Fill	in the details.					
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance befo
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	bors Credit Unic	on		_		
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1			Case number (# known)	
	First Name Middle Name Last	Name		
		or place other than your home within	1 year before you filed for bankruptcy	?
ve yo No	ou stored property in a storage unit	or place other than your nome within	Tyen perote you mad to build apacy	•
	s. Fill in the details.			
		Who else has or had access to it?	Describe the contents	Do you si have it?
			: : :	□ No
N	ame of Storage Facility	Name		Yes
N	umber Street	Number Street		
_		City State ZIP Code		:
CI	ity State ZIP Code		1	
9:	Identify Property You Hold	or Control for Someone Eise		
			perty you borrowed from, are storing f	nr.
		omeone eise owns? include any pro	perty you borrowed from, are storing to	011
No	d in trust for someone.			
_	s. Fill in the details.			•
ı re	s. rm in the details.	VBSh are in the manuscripes	Describe the property	Value
		Where is the property?	pescribe the property	Yaude
			· · ·	
ō	Wner's Name		1	\$
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Cindy Denise Wells Debter 1 Case number (it known), 45. Have you notified any governmental unit of any release of hezerdous material? U Yes. Fill in the details. Gevernmentel unit Environmental law, if you know it Data of notice Ver 4 27 2014 Gavarriasiski koit Musiker Breet Marker Brases State 2000s Chy 80000 £15 3vda 21. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and crists. O Yes. Fift in the details. Sincus of the Court or agency Natura of the case Di Fendina D On appeal Number Street Tonaludod Cess morrus State ZiP Gzde Part 17: Cive Datalla Alcouit You: Business or Connections to Any Business 27. Within 4 years before you filled for benimpley, did you own a business or have any of the following connections to any business? 🔲 Levis proprietor or ealf-employed in a trade, profession, or other activity, either full-lime or peri-lime LA menter of a limited lieblity company (LC) or limited lieblity postmership (LLP) 🖳 A pantret in a partretably \square An efficer, director, or managing executive of a corporation \square An owner of at least 5% of the voting or equity securities of a corporation Mo. None of the above applies. Co to Part 12. Di Yea. Check oil that apply above and fill in the details balow for each business. Employer Werdiffersion number Describe the nature of the business social service agency dedicated 82 404635 -Datas business exists t Cindy Denise Wells 12/29/17 01/03/19 Depositive this mature of the business. Employer Marcilles San rember Do not include Spoid Society number or ITM. Quetas se Neare Maritier Street Dates business extend Name of escavatant or bookingener

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	ast Name	e number (# known)
-	Describe the nature of the business	Employer Manuffeetign number To mad include Sectol Security number or 1900
Euringas Netra	<u> </u>	Do not include Social Security number of TVR
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Florissant MO L Sign Relow The read fits analysis on this States The read fits analysis on th	23631 23631 23631 246 Financial Affairs and any attachments, and that making a false statement, consealing an result in fines up to \$250,000, or imprison an result in fines up to \$250,000, or imprison an result in fines up to \$250,000 for imprison an extension of Financial Affaire for individual of Statement of Financial Affaire for individual contents to help you fill out bank	g property, or obtaining motivey at property by fran ment for up to 20 years, or both. s <i>Filing for Bankruptcy</i> (Official Form (47)?

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Fill in this information to identity your case:				Check one box o	nly as directed in this form and in	ł
		ü	7	Form 122A-1Sup		ĺ
Debtor 1 Cindy Denise Wells First Name Middle Name	Last Name			Di di Thomain no	presumption of abuse.	
Debtor 2					•	
(Spouse, if filling) First Name Middle Name United States Bankruptcy Court for the: Eastern District of Missot	Last Name Uri			abuse applie	ion to determine if a presumption of es will be made under <i>Chapter 7</i> <i>Calculation</i> (Official Form 122A–2).	
Case number(If known)	-				Test does not apply now because of itary service but it could apply later.	
		<u>, , , , , , , , , , , , , , , , , , , </u>		Check if this	is an amended filing	•
Official Form 122A-1						
Chapter 7 Statement of Your	Curre	nt Mo	nthi	y Income	12/15	
Be as complete and accurate as possible, if two married p space is needed, attach a separate sheet to this form. Incle additional pages, write your name and case number (if known thave primarily consumer debts or because of quality Abuse Under \$ 707(b)(2) (Official Form 122A-1Supp) with I	lude the line own). If you ifying militar this form.	number to believe tha	which th t you are	e additional information exempted from a	mation applies. On the top of any presumption of abuse because you	
Part 1: Calculate Your Current Monthly Income						3
What is your marital and filing status? Check one only.	•					-
Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out	t hoth Columi	ns A and R	lines 2-11			
☐ Married and your spouse is NOT filing with you. Y						-
	_	-		mne A and P lines	2 11	-
•						-
Living separately or are legally separated. Fill under penalty of perjury that you and your spous	se are legally	separated u	ınder non	bankruptcy law tha	t applies or that you and your	
spouse are living apart for reasons that do not in		•		•		
Fill in the average monthly income that you received bankruptcy case. 11 U.S.C. § 101(10A). For example, if August 31. If the amount of your monthly income varied of Fill in the result. Do not include any income amount more income from that property in one column only. If you have	f you are filing during the 6 n than once. F	g on Septerr nonths, add For example	ber 15, the the incon , if both s	ne 6-month period one for all 6 months pouses own the sa	would be March 1 through and divide the total by 6.	
	•	•	·	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, ar (before all payroll deductions).	nd commissi	ions		\$ <u>2424.0</u> 0	\$	
 Alimony and maintenance payments. Do not include per Column B is filled in. 	ayments fron	n a spouse i	f	\$	\$	
4. All amounts from any source which are regularly paid of you or your dependents, including child support. In from an unmarried partner, members of your household, and roommates. Include regular contributions from a spot filled in. Do not include payments you listed on line 3.	nclude regula your depende	ar contribution ents, parent	ns s,	\$	\$	Commence of the Commence of th
5. Net income from operating a business, profession,	Debtor 1	Debtor 2				
or farm Gross receipts (before all deductions)	\$	\$				
Ordinary and necessary operating expenses	- \$	- \$				
Net monthly income from a business, profession, or farm	\$	\$	Copy here	\$	\$	1
Net income from rental and other real property Gross receipts (before all deductions)	Debtor 1 \$	Debtor 2 \$				
Ordinary and necessary operating expenses	- \$	- \$	_			
Net monthly income from rental or other real property	\$	\$	Copy here	\$	\$	
7. Interest, dividends, and royalties				\$	\$	-

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Ofcr 1 CUNCU DENISE WELLS First Name Last Name	Case number (#known)		
	<i>Ociuma A</i> Debior 1	Column 8 Osbior 2 or non-filing space	$\vec{\mathfrak{p}}$
. Unemployment compansation	\$	¥	0
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:			
FG 703			
For your spouse			
Penaton or relination income. Do not include say amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not bounte any companies, penaton, pay, emaily, or allowance point by the United States Government in connection with a disability, combat-related injury or disability, combat-related injury or disability combat-related injury or disability and extend of a member of the uniformed services, if you received any relited pay paid under chapter 61 of the 10, then include that pay any to the extent that it does not exceed the amount of relited pay to which you would otherwise be suitled if relited under any provision of life 10 other than chapter 61 of that life.	£	Fig. 1. A since the second second second second	
O. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or interretional or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, a death of a member of the uniformed services. If necessary, list other sources on a superste page and put the total bolow.			
	Ŷ <u> </u>	4,	-
тин 🚉 түүлүү жүү түү төмий тама тама тама тама тама тама тама там	£	The standard deviation of the state of	9
Total amounts from separate pagas, if any.	€= 0	The State of the second	9
Calculate your total current monthly (ncome, Acd lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	2424.0	ð I	Tethi annomi mankoy tea ana
Part 24 Determine Whether the Hours Test Applies to Yeu			
2. Callywate your sument monthly income for the year. Follow these steps: 12s. Copy your total current monthly income from line (1)	98	ny ilos 11 hars 🕏	2404.0
Molitaly by 12 (the number of months in a year).			x 12
12b. The result is your amual income for this part of the form.		12b.	29088.
5. Originale the median family income that applice to you. Fellow these steps:			
Fill in the state in which you live.			
Fill in the number of people in your household.			h 5 7 4 12. 2 12. 12. 12. 12. 12. 12. 12.
Fill in the median family income for your state and size of household		13.	51,421.
To fine a list of applicable median income amounts, go online using the link specified is instructions for this form. This list may also be available at the bankruptcy certal office	n the separete		
4. How do the lines compare?			
1ks. $m{E}$ Line 125 is less than or equal in line 13. On the top of page 1, check box 1, 7 Go to Pari 3.	here is no precumptio.	n of sbuse.	
145. D. Line 125 is more than line 13. On the top of page 1, check box 2, The presum Go to Part 9 and fit out Form 1224–2.	ption of abuse is date	miasá by Form 12:	14-2.

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Debter 1	Candy Denise Wells First Name Middle Name Last Name	Case number (#known)
Peri 3	Sign Below	
	By signing here, I vise are under panelty of explory that the information on	this statement and in any afactments is true and correct.
	23 Parlet S	×
authors mesococo	Signature of Debtor 1	Signature of Debtor 2
A Commission of the Commission	Deta 01 103 (2020 3020) MM / DD / YYYY	Date
an aquindramen	If you checked the 14e, do NOT fill out or she Form 1224–2.	
Made on participation	If you chacked line 14b, fill out Form 122A-2 and itself with this form.	

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Fill in this information to identify your case:		
Debtor 1 Cindy Denise Wells		
First Name Middle Name Last Name Debtor 2		
(Spouse, if filling) First Name Middle Name Last Name		
United States Bankruptcy Court for the: Eastern District of Missouri		Check if this is an
Case number(if known)		amended filing
Official Form 108		
Statement of Intention for Indiv	iduals Filing Under Cha	pter 7 12/15
If you are an individual filing under chapter 7, you must fill out this for creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file you whichever is earlier, unless the court extends the time for cause. You fit two married people are filing together in a joint case, both are equivalent below. Be as complete and accurate as possible. If more space is needed, write your name and case number (if known). Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors with below.	d. bur bankruptcy petition or by the date set for the nou must also send copies to the creditors and less hally responsible for supplying correct information attach a separate sheet to this form. On the top of	ors you list on the form. any additional pages,
information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Fox Grove Management	Surrender the property.	₩ No
	Retain the property and redeem it.	☐ Yes
property Management	Retain the property and enter into a Reaffirmation Agreement.	
securing debt: 2731 Allen Ave. Apt. B Saint Louis, MO 63104	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property	Retain the property and enter into a	
securing debt:	Reaffirmation Agreement. Retain the property and [explain]:	
BURGERS AND THE PROPERTY AND A SECURITY OF THE PROPERTY WHEN A SECURITY OF THE PROPERTY OF THE	The cook stops are a superior stop of the cook of the	не мен журе кашина по таку а достогу и до го и те поменана и не
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property	Retain the property and enter into a Reaffirmation Agreement.	
securing debt:	Retain the property and [explain]:	
AND THE RESIDENCE OF THE PROPERTY OF THE PROPE		
Creditor's name:	☐ Surrender the property.	□ No
Description of	Retain the property and redeem it.	Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	
·		

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Debtor 1

Cindu	Denise	wells	
First Name	Middle Name	Last Name	

Case number	(If known)		

O	
art 2: List Your Unexpired Personal Property Leases	
or any unexpired personal property lease that you listed in <i>Schedule G: Exe.</i> I in the information below. Do not list real estate leases. <i>Unsupired leases</i> at ded. You may assume an unexpired personal property lease if the trustes d	ra feases that are still in effect; the lease pariod has not yet
Describe your unexpired paragnal property leases	Wil the lesse be assumed?
Leasor's nema:	CI »p
Description of Iseasd property:	1 / 20
Lessor's name:	
Description of Isaced	Cl Yes
described to the commence of the control of the con	and the second s
Leacor's name:	Di Mo
Description of leased property:	☐ Yes
Lessor's name:	□: Mo
Description of leased property:	Cl Yee
Lessor's came:	LI No
Description of Issaed property:	□ Yes
Lessor's name:	□ Ho □ Yes
Description of tessed supports:	년 193
Lesser's rema:	Ŭ №o
	☐ Yag
Description of leased property:	
t 2: Sign Bakow	
inder panelty of perjury, I decises that I have indicated my intention about a eraonal property that is subject to an unexpired lease.	my property of my estate that secures a debt and any
0 0 0 0 lz	
Signature of Data to 2	
Signature of Debter 1 Signature of Debter 2	
Date	Y

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MISSOURI
MOISTAIC

tyre debtorn Undy Den)	Case No Chapter	
الانامة	مرد) بديد	,		

Verification of Creditor Matrix

The above named debtor(s) hereby cartifies/certify under penalty of perjury that the attached list containing the names and addresses of my creditors (Matrix), consisting of page(s) and is true, correct and complete.

Joint Debtor

Dated: 01/03/2020

Cindy Denise Wells Matrix

Ace Cash Express 1231 Greenway Drive Suite 670 Irving, TX 75038

Amazon 410 Terry Ave Seattle, WA 98109

Bank of America PO Box 982238 ElPaso Tx 79998

Best Buy Credit Services PO Box 7809 Phoenix, AZ 85062

BJC Healthcare POBox 954810 St. Louis, MO 63195

Capital One PO Box 85619 Richmond, VA 23285

Cash Net USA 175 W. Jackson Blvd. Suite 100 Chicago, IL 60604

Citi Bank PO Box 6077 Sioux Falls, SD 57117

Des Peres Medical Arts Pavilion 2315 Dougherty Ferry Rd St. Louis, MO 63122

Digitech Computer Inc 480 Bedford Rd, Bldg 600 Chappaqua, NY 10514

Forest Park Dental 4527 Forest Park Ave St. Lois, MO 63108 Fox Grove Management 2758 Russell Blvd. St. Louis, MO 63104

Laboratory Corp of America PO Box 2240 Burlington, NC 27216

Lindenwood University 209 South Kingshighway St. Charles, MO 63301

Neighbors Credit Union 6300 South Lindbergh St. Louis, MO 63123

Northwestern Mutual 720 E. Wisconsin Ave Milwaukee, WI

NPRTO Mid-West, LLC 256 W Data Drive Draper, UT 84020

Our Urgent Care Billing PO Box 874248 Kansas City, MO 64187

PayPal 2211 North First St. San Jose, CA 95131

PNC Bank PO Box 747066 Pittsburgh, PA 15274

Powderly Law Firm, LLC 11965 St. Charles Rock Rd Suite 202 St. Louis, MO 63044

Purchasing Power 1349 W Peachtree St NW #1100 Atlanta, GA 30309

Quest Diagnostics PO Box 740780 Cincinnati, OH 45274 Rent A Center Inc. 3405 Gravois Ave St. Louis, MO 63118

Sprint PO Box 4191 Carol Stream, IL 60197

St. Ann Municipal Court 10405 St. Charles Rock Road St. Ann, MO 63074

St. Louis Dermatology Center 8888 Ladue Rd St. Louis, MO 63124

Synchrony Bank PO Box 960061 Orlando, FL 32896

Traffic Law Center 1610 Des Peres Rd Suite 330 St. Louis, MO 63131

University of Missouri Saint Louis One University Blvd St. Louis, MO 63121

US Bank PO Box 1800 Saint Paul, mn 55101

Walden University Burar's Office 7065 Samuel Morse Dr. Columbia, MD 21046

Washington University 660 South Euclid Ave Campus Box 8239 St. Louis, MO 63110

West Creek Financial PO Box 5518 Glen Allen, VA 23058